

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. MR MICHAEL J HERMAN

Mailing Address 1223 HOLLOW RD

City

COLLEGEVILLE

State

PA

Zip Code

19426

FEC ID number of contributing
federal political committee.

C

Name of Employer

TROOPER VETERINARY HOSPITAL INC.

Occupation

VETERINARIAN

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.301862

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JAMES HIGASHIDE

Mailing Address 1253 S. BERETANIA #1517

City

HONOLULU

State

HI

Zip Code

96814

FEC ID number of contributing
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 06 / 2014

Transaction ID : SA11AI.319904

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. JAMES HIGASHIDE

Mailing Address 1253 S. BERETANIA #1517

City

HONOLULU

State

HI

Zip Code

96814

FEC ID number of contributing
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 09 / 2014

Transaction ID : SA11AI.320427

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

1100.00

TOTAL This Period (last page this line number only)..... ►